APR 1 9 2007

### PART B - FEE(S) TRANSMITTAL

Complete and send this form together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmisting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate All furnish through 5 should be completed where indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Use Black 1 for any change of address)

01/19/2007

Colleen D Szuch Esq. Honcywell International 101 Columbia Road Building Meyer 5 Morristown, NJ 07962-2245

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being furnimite transmitted to the USPTO (571) 273-2885, on the date indicated below.

Jennifer Schneller	(Depositor's name)
ニュージャンノイベングングをプレー	(Signature)
April 19, 2007	(Date)

			7 , 2007	
APPLICATION NO.	FILING DATE	FULCE MANAGED MANAGED	<del></del>	
		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/694,272	10/27/2003			TO: TO:
THE E OF HARMEN		Daniel C. Marke)	21 (08750001	2204

TITLE OF INVENTION: PROCESS FOR PRODUCING FLUOROPROPENES

nonprovisional NO \$1400 \$300 \$000 \$000 TESHARZ 02202016 10694272  EXAMINER ART UNIT CLASS-SUBCLASS WITHERSPOON, SIKARLA 1621 570-155000 02 FC:1501 1400.  Change of correspondence address or indication of "Fee Address" (37 Change of correspondence address or indication of "Fee Address" (37 Change of correspondence address (or Change of Correspondence address (or Change of Correspondence or agents OR ulternatively,	APPLN, TYPE	SMALL ENTITY		<del></del>			
EXAMINER ART UNIT CLASS-SUBCLASS WITHERSPOON, SIKARL A 1621 570-155000 02 FC:1501 1480. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Change of correspondence address (or Change of Correspondence or agents OR, ulternatively,		SMALL ENTITY	ISSUE PER DUE	PUBLICATION FEE DUE	PICEV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
WITHERSPOON, SIKARL A 1621 570-155000 01 FC:1501 1400.  Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list  Change of correspondence address (or Change of Correspondence or agents OR, ulternatively, or agents OR, ulternatively,	nonprovisional	NO	\$1400	\$300	_\$0	<u> </u>	<u></u>
WITHERSPOON, SIKARL A 1621 570-155000 01 FC: 1501 1400.  Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list  Change of correspondence address (or Change of Correspondence or agents OR, ulternatively,	EXAM	IINER	ART UNIT	CLASS-SUBCLASS	04/29/2007	TBESHAH2 02000016	18694272
C. Change of correspondence address or indication of "Fee Address" (37      C. For printing on the patent front page, list      Change of correspondence address (or Change of Correspondence Address form PTO/SD/122) attached.      C. For printing on the patent front page, list      (1) the numes of up to 3 registered patent attorneys or agents OR, ulternatively,				570-155000			1400.00 OP
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  (1) the numes of up to 3 registered patent attorneys or agents OR, alternatively,	<ol> <li>Change of corresponde CFR 1.363).</li> </ol>	ence address or indication	of "Fee Address" (37	2. For printing on the p		<del>-</del>	300.00 OP
	Charge of coesses	ondon	nge of Correspondence	(1) the numes of two to	1 maring and the contract of t	neys I	· <del></del>
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer  Number is required.  registered attorney or agent) and the names of up to 2 registered patent attorney or agents. If no name is 1 isted, no name will be printed.	PTO/SB/47: Rev 03-02 or many recent attacked indication form		(2) the name of a single	e firm (having as a memb			

PLEASE NOTH: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) RESIDENCE: (CITY and STATE OR COUNTRY)

noncywell international inc.	Morristown, NJ
lease check the appropriate assignee category or categories (will not be	oc printed on the patent):
:a. The following fee(s) are submitted:    Issue Fee   Issue Fee	<ul> <li>4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-5425 (enclose an extra copy of this form).</li> </ul>
· Change in Entity Status (from status indicated above)	(cnclose an extra copy of this form).
Li a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1 27	b. Applicant is no longer claiming SMALI, ENTITY status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be accenterest as shown by the records of the United States Putent and Tradem	b. Applicant is no longer claiming SMALI, ENTITY status. See 37 CFR 1.27(g)(2).  spled from anyone other than the applicant; a registered anomey or agent; or the assignee or other party in lark Office.
Authorized Signature Common Starton  Typed or printed name Jimmie Johnson	
	Registration No. 52, 485

his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form und/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450, Icxandria, Virginia 22313-1450.

Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

IOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

OMB 0651-0033



# FACSIMILE COVER SHEET

# LAW OFFICES OF SYNNESTVEDT & LECHNER LLP

2600 ARAMARK Tower 1101 Market Street Philadelphia, PA 19107-2950 Phone No.: (215) 923-4466 Facsimile No.: (215) 923-2189

# PLEASE DELIVER THE FACSIMILE TRANSMITTED HEREWITH TO:

Name:	Commissioner for Patents
From:	Jimmie Johnson
Re:	U.S. Appln. No. 10/694,272; Issue and Publication Fee
	S&L Docket No.: P26267 USA
A total	of 3 page(s), including this cover sheet, will be transmitted.
Confir	mation copy sent: Yesx No
Name	of Operator: Jennifer Schneller
Date S	ent: April 19, 2007
Facsim	tile number of recipient: <u>1-571-273-2885</u>
REMA	ARKS:

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE ADDRESSEE AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED AND CONFIDENTIAL. IF YOU HAVE RECEIVED THIS MESSAGE IN ERROR PLEASE NOTIFY US BY TELEPHONE IMMEDIATELY. TO DO SO, YOU MAY CALL US COLLECT.